

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	METHOD TO TREAT PATIENTS WITH AMYOTROPHIC LATERAL SCLEROSIS AND THE LIKE																						
Application Number :																							
Date :																							
First Named Applicant:		Ms. Roberta N. Malone Rooney																					
Attorney Docket Number:																							
TOTAL FEE AUTHORIZED \$ 685																							
Patent fees are subject to annual revisions on or about October 1st of each year.																							
Filing as small entity																							
BASIC FILING FEE																							
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 385</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	385	385				Subtotal For Basic Filing Fees: \$ 385								
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			Subtotal For Basic Filing Fees: \$ 385																				
EXTRA CLAIM FEES																							
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PRE GRANT PUBLICATIONS FEES																							
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Publication Fee For Early or Voluntary Publication	1504	300	300																				
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AUTHORIZED BILLING INFORMATION																							
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																							
Credit account number:	5062																						
Expiration Date (YYYYMMDD):	2007-03-31																						
Authorized name:	Roberta N Rooney																						
Billing address:	44070																						